F3 Stakeholders Meeting
Tuesday, April 23, 2002
9:30 AM – 12:30 PM

Discussion regarding INFRASTRUCTURE:

Structure:

- Representative coalition with defined leadership, scope of authority, roles and responsibilities, and clear mission and goals, and funding.
- Representative of all systems so value can be seen of each element.
- Formalized, clear expectations and commitment to create continuity and consistency.
- Make opportunity irresistible.
- Make it important, a status, a value – something that can't be missed.
- When decisions are made they are taken seriously.
- Process of voice of collective group has influence.
- Keep eye on purpose.
- Endorsed – SpEd, heads of every aspect involved.
- Characterized by transparency: information flow, process, and principles.
- Semi-annual, annual conferences with governor as keynote and highlighting work.
- Policies.
- By-laws.
- Identifiable purpose.
- Connected to my organization (so I must choose to be involved).
- Assess need for trappings of structure that can get in the way.
- Target relationships and purpose.
- People who sit on it represent major stakeholders:
  - Mental health providers;
  - Child/families servers – in patient, residential, day treatment, etc.;
  - Substance abuse;
  - Dual diagnosis;

Function:

- Orientation to integration of principles.
- Social marketing role.
- Defines constructive change.
- Reduces unknowns.
- Sustains system of care where risk is shared/balanced.
- Serves a role in process evaluation.
- Offers strong technical assistance.
- Related to system of care:
  - Oversight;
  - Development;
  - Recipient of evaluation;
  - Measure outcomes;
  - Holding system accountable.
- Integrate/internalize moral obligation to children in entities and individuals.
- Build the "whatever it takes" attitude.
- Internalize collective claim on children and families – help stories be heard – what was prevented, making kids real (social marketing?)
- Feel a part of kids' lives.
- Create incentives and make them meaningful.
- Look beyond 190 families – so community embraces philosophy.
- Cultivate personal responsibility for all kids.
- Build relationships with larger community.
- Leadership and advocacy.
- Social marketing as a joint effort.
- Ensure that families are involved in social marketing (range of policy and action).
- Reduce disconnects.
- Capitalize on helping system have value to families, individuals, organizations in and out of system, and help entities/families add value.

- Schools;
- Treatment group homes;
- Family at different levels – residential, dual diagnosis, transitional living group home, agency based foster care, etc.;
- Out patient therapy;
- Juvenile justice system, probation;
- Shelter;
- Five and under mental health;
- Early childhood development care providers;
- Early intervention;
- Private corporations, funders, Bar Association;
- Public officials – County Board, HHS, governing units;
- Law enforcement;
- Community representatives – agencies, cultural centers;
- UNL;
- Cultural communities;
- Public at large – parents;
- Religious/faith communities.
- How to manage:
  - Cover service areas through representation, trust, and communication.
  - Approx. 15 people as core, with others active "outside" core.
  - Meet on regular/monthly basis with communication channels in place in between meetings.
  - Strategic plan in place with goals, evaluation schedule, tasks, purpose.
  - Open decision-making processes.
  - Maybe 25-30 people in core.
  - Strategic planning group plus an action group empowered to make decisions, empowered to commit, empowered to act – money moved, product delivered.
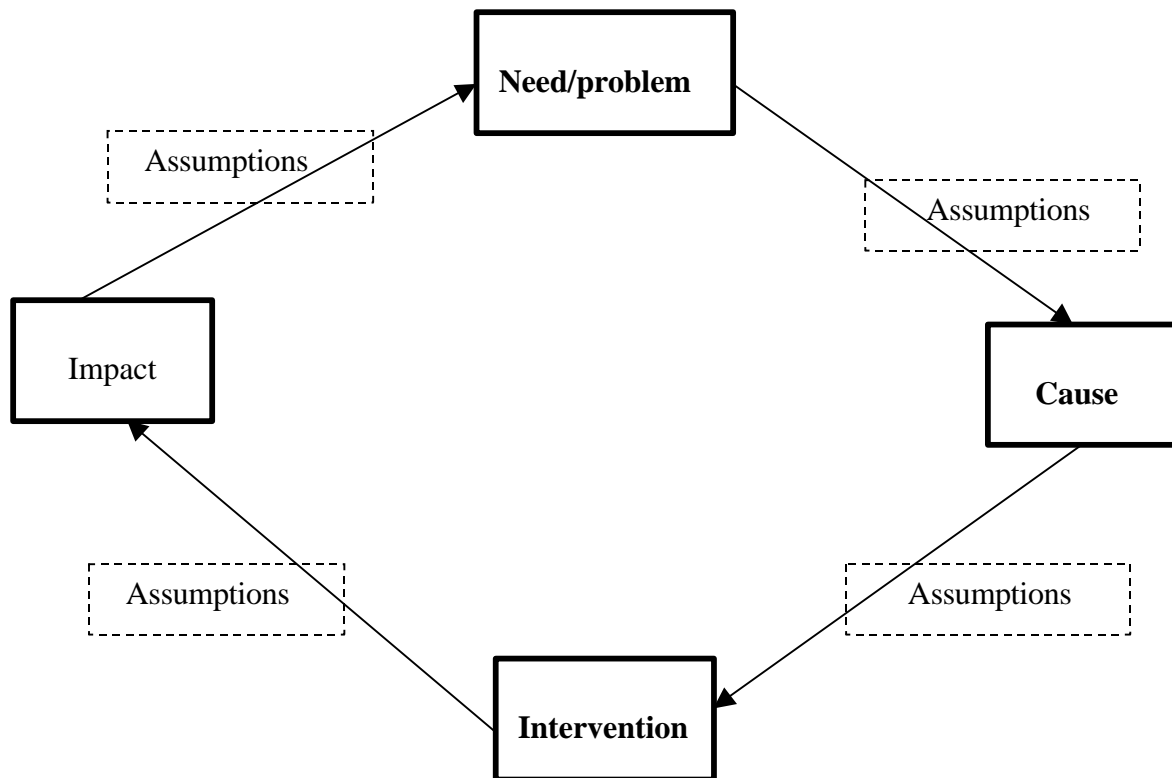
[Aside: over next six months, negotiating with DHHS to add another 191 kids/families with job to get them to lowest level of care through funding services; it will broaden involvement within the community and make it especially important opportunity to integrate juvenile justice system; looking to a total of 300 families.]

- Make sure that system of care becomes inclusive while grant exists and after;
- Role in reviewing system decisions;
- Sets standards for inclusion and decisions;
- Ensure system of care "attitude" – gatekeepers at table.
- Keep "business" balanced with "mission" – providers, gatekeepers (integrate into social marketing);
- Reduce disconnect between power brokers and who is at this table.
- Get integrity back in, where good decisions are made, not "cheap" decisions.
- Facilitate combination of family services with out of home placement and pooling (not categorical) funding accessible for child needs as needed.
- Discourage adverse/hidden agendas.

Discussion regarding EVALUATION:

- Two tiers of assessment: accountability to principles and accountability of services.
- Interested in percent of detained kids released into system of care – question of whether referrals are being made into the system of care.

- Entity makes contact with f3 and says, "We need to be more strength-based (reports, etc.)," or it is evident that they don't realize what principles are; coalition assesses where entity lands in terms of the established principles, makes recommendations, and monitors for continuous quality improvement that reflects principles.
- Principled decisions → outcomes.
- **How does f3 connect outcomes with how it got there?**
- Look to expertise to design how to measure what f3 decides to measure.
- **Coalition's evaluation role:** coalition identifies what we want to know; taps expertise to design model and implementation process (identifying performance indicators) to measure accountability to principles and accountability of services.
- Look at what families say.
- Program planning model: outputs → process → inputs; checking assumptions (e.g. identify a need, presumed cause, presumed effective intervention, presumed impact – assess at each stage to determine accuracy of assumptions); typically, intervention (program) put in place and impact looked at.

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                    │ Need/problem │
        Assumptions └──────────────┘ Assumptions
    ┌────────┐                          ┌────────┐
    │ Impact │                          │ Cause  │
    └────────┘                          └────────┘
        Assumptions    ┌──────────────┐ Assumptions
                       │ Intervention │
                       └──────────────┘
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- **Question:** what does "disconnect with juvenile justice" mean?
- **Response:** some entities see good support and connections; it is less philosophical – juvenile justice appears to be on board – and more in terms of being *part* of system of care rather than handing things off to system of care.